REQUEST FOR TAX REFUND

Name of taxpayer(s)	or business entity	· -	Carrie Wray Curtis, Trustee Revocable Living Trust		
Mailing Address:		P. O. Box 857 Yorktown, VA 23692			
Reason for request (atta	ach additional informat		Jsc value of \$6,700 was not applie		
to this parcel in error pe	er Assessor's Office.	e, full and correct to the best of my	knowledge and helirt:		
Carrio	Thay Curtal taxpayer or authorized officer	•	6/4/0/ Date		
Type of Tax D		otion of Property	Amount of T	Amount of Tax	
Tax Year Ticket #				to be Refunded	
RE-2000	Tax Map #024 149D (Rt 622)		Tax:	\$ 3,267.14	
	Bill #4252		Penalty:	\$	
			Interest:	\$	
GL# 3-010-0	<u> 130511 - 1010 - 3</u>	200 605 = 163	3.57 TOTAL: 3.57 Tax:	\$3,267.14	
3-010-0	OBOSH - 1010 -	SCC 135 = 1163	Penalty:	\$ \$	
			Interest:	\$	
GL#			TOTAL:	\$	
			Tax:	\$	
			Penalty:	\$	
			Interest	\$	
GL#			TOTAL	\$	
Amount of Refund for Taxes Paid				\$3,267.4	
			Interest Paid by the County	\$ 254.46	
		TOTAL REFUND D REFUND AUTHOR		\$3521.60	
indicated for the following reason(s): See About Commissioner of the Revenue		AOBY COUNTY WISSIGNES OF THE REVENUE TON 6 2001 TON 2 2001	6/5/0) Date		
equested. Such payme		ed the County by the tax	payment of tax for which a refunct (payer(s) which should be deducted		
Doborah	B. Palur		Lo Jii O	() 1 1 0 1	
		County Attorney			
			c, I hereby consent to a tax refund y amount owed the County by the		
	County Attorney	### *** ·	***************************************	Date	
	Fina	ncial and Management	Service		
In accordance w	rith the above authoriza	ations, the refund above	has been issued accordingly.		
	inancial and Management Service	Date	Date		